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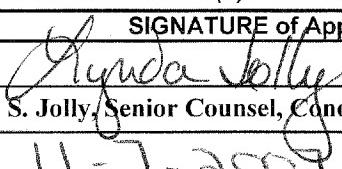
REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	<table border="1"> <tr><td>Application Number</td><td>10/027,192</td></tr> <tr><td>Filing Date</td><td>12/20/2001</td></tr> <tr><td>First Named Inventor</td><td>KHARE, Gyanesh</td></tr> <tr><td>Art Unit</td><td>1793</td></tr> <tr><td>Examiner Name</td><td>LANGE, Wayne A.</td></tr> <tr><td>Attorney Docket Number</td><td>33872US (KDK)</td></tr> </table>	Application Number	10/027,192	Filing Date	12/20/2001	First Named Inventor	KHARE, Gyanesh	Art Unit	1793	Examiner Name	LANGE, Wayne A.	Attorney Docket Number	33872US (KDK)
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First Named Inventor	KHARE, Gyanesh												
Art Unit	1793												
Examiner Name	LANGE, Wayne A.												
Attorney Docket Number	33872US (KDK)												

I hereby revoke all previous powers of attorney given in the above-identified application: A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number: **23589** Please change the correspondence address for the above-identified application to: The address associated with Customer Number: **23589****OR**

<input type="checkbox"/> Firm or Individual Name				
Address				
City		State	ZIP	
Country				
Telephone		Email		

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71
*Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Lynda S. Jolly, Senior Counsel, ConocoPhillips Company		
Date	11-7-2001	Telephone	(918) 661-0611

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of **1** forms are submitted.

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